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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/576,250			ing Date 18/2006	☐ To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL ENTITY			HER THAN ALL ENTITY
FOR			UMBER FI	.ED NUI	MBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A	1	N/A		1	N/A	
	SEARCH FEE (37 CFR 1 16(k), (i),	or (m))	N/A		N/A	1	N/A]	N/A	
	EXAMINATION FE (37 CFR 1,16(o), (p),		N/A		N/A		N/A			N/A	
TO' (37	TAL CLAIMS CFR 1.16(i))		mir	us 20 = *		l	x s = 1		OR	x s =	
IND (37	EPENDENT CLAIM CFR 1.16(h))	IS	minus 3 = *			l	X \$ =		1	X \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addi	ts of pap 50 (\$125 tional 50	ation and drawings exceed 100 er, the application size fee due for small entity) for each sheets or fraction thereof. See a)(1)(G) and 37 CFR 1.16(s).							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))]			ı		
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL]	TOTAL	L
APPLICATION AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY											
AMENDMENT	10/13/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	* 62	Minus	·· 68	= 0]	X \$ =		OR	X \$60=	0
	Independent (37 CFR 1.16(h))	• 2	Minus	···3	= 0	ı	X \$ =		OR	X \$250=	0
	Application Size Fee (37 CFR 1.16(s))								L		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					П	1		OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
		(Column 1)		(Column 2)	(Column 3)						
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16(i))		Minus		=		X \$ =		OR	x s =	
M	Independent (37 CFR 1 16(h))		Minus	***	-	l	X \$ =		OR	x s =	
Į.	Application Size Fee (37 CFR 1.16(s))								l		
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
									OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "O' in column 3. *If the "Highest Number Previously Paid For' IN THIS SPACE is less than 2, enter "20". *If the "Highest Number Previously Paid For' IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For' (Total or independent) is the highest number found in the appropriate box in column 1. *The Thighest Number Previously Paid For' (Total or independent) is the highest number found in the appropriate box in column 1. *The Thighest Number Previously Paid For' (Total or independent) is the highest number found in the appropriate box in column 1. *The Thighest Number Previously Paid For' (Total or independent) is the highest number found in the appropriate box in column 1.											

This collection of information is required by 37 CFR 11.6. The information is required to obtain or retain a benefit by the public which is to file (and by the DSF) process) an application. Confidentially 35 opened by 36 opene